



03-19-07

JCC  
90

PTO/SB/30 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Request for Continued Examination (RCE) Transmittal</b>  Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/655,911
	Filing Date	September 5, 2003
	First Named Inventor	Arturo J. ANGEL
	Art Unit	1615
	Examiner Name	L. Channavajjala
	Attorney Docket Number	524522000500

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- ii. ☐ Other \_\_\_\_\_
- b. ☒ Enclosed
- i. ☒ Amendment/Reply – 14 pages
- iii. ☒ Information Disclosure Statement (IDS) – 3 pages
- ii. ☐ Affidavit(s)/Declaration(s)
- iv. ☒ Other Fee Transmittal + duplicate copy for fee processing – 2 pages; Form PTO/SB/08a/b – 1 page; Return Receipt Postcard
2. **Miscellaneous**
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other \_\_\_\_\_
3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- a. ☒ The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments to Deposit Account No. 03-1952 I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.
- i. ☒ RCE fee required under 37 CFR 1.17(e)
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other \_\_\_\_\_
- b. ☐ Check in the amount of \$ \_\_\_\_\_ enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
Signature		Date	March 16, 2007
Name (Print/Type)	Lisa A. Amii	Registration No.	48,199

I hereby certify that this paper is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 377983604 US, on the date shown below in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: March 16, 2007

Signature: (Lori Sims)

pa-1139034

03/20/2007 HGUETRAI 00000011 031952 10655911

395.00 DA  
01 FC-2801



<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2007</b>		Application Number	10/655,911
		Filing Date	September 5, 2003
		First Named Inventor	Arturo J. ANGEL
		Examiner Name	L. Channavajjala
		Art Unit	1615
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	524522000500
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 395.00		

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

**FEE CALCULATION**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0.00
Design	200	100	100	50	130	65	0.00
Plant	200	100	300	150	160	80	0.00
Reissue	300	150	500	250	600	300	0.00
Provisional	200	100	0	0	0	0	0.00

2. EXCESS CLAIM FEES		Small Entity	
Fee Description	Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)	50	25	
Each independent claim over 3 (including Reissues)	200	100	
Multiple dependent claims	360	180	

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
43	- 44 = 0	x 25.00 =	0.00	Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.				180.00	0.00

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
7	- 7 = 0	x 100.00 =	0.00

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x	=	

4. OTHER FEE(S)		Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		0.00
Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37 ...		395.00

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	48,199
Name (Print/Type)	Lisa A. Amii	Telephone	(650) 813-5674
		Date	March 16, 2007